

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

  
Van Ness Plastics Molding Co., Inc.  
400 Brighton Rd  
Clifton, NJ 07012-1013



9590 9403 0891 5223 2540 64

2. Article Number (Transfer from service label)

7014 3490 0000 7478 9100

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY****A. Signature**

X

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

**Service Type**

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☒ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery over \$500

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

USPS TRACKING#



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

9590 9403 0891 5223 2540 64

**United States  
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•



The Office Of The Clerk  
U.s. District Court For The Northern Dis. Of Ohio  
Carl B. Stokes U. S. Courthouse  
801 W Superior Ave  
Cleveland, OH 44113-1829

1:15 -CV-2077